Application Data Sheet:

Application Information

| Application number:: | ТВА |
|----------------------------------|--------------------|
| Filing Date:: | 07/14/03 |
| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | |
| Number of CD disks:: | |
| Number of copies of CDs:: | |
| Sequence submission?:: | CD |
| Computer Readable Form (CRF)?:: | No |
| Number of copies of CRF:: | |
| Title:: | RAID 3 + 3 |
| Attorney Docket Number:: | ARC9-2003-0040-US1 |
| Request For Early Publication?:: | No |
| Request For Non-Publication?:: | No |
| Suggested Drawing Figure:: | 1 |
| Total Drawing Sheets:: | 2 |
| Small Entity?:: | No |
| Latin name:: | |
| Variety denomination name:: | |
| Petition included?:: | No |
| Petition Type:: | |
| Licensed US Govt. Agency:: | |
| Contract or Grant Numbers:: | |
| Secrecy Order in Parent Appl.?:: | No |

Applicant Information

| Applicant Authority Type:: | Inventor |
|--|------------------|
| Primary Citizenship Country:: | USA |
| Status:: | Full Capacity |
| Given Name:: | Steven |
| Middle Name:: | Robert |
| Family Name:: | HETZLER |
| Name Suffix:: | |
| City of Residence:: | Los Altos |
| State or Providence of Residence:: | California |
| Country of Residence:: | USA |
| Street of mailing address:: | 246 Eleanor Ave. |
| City of mailing address:: | Los Altos |
| State or Province of mailing address:: | California |
| Country of mailing address:: | USA |
| Postal or Zip Code of mailing | 94022 |
| address:: | |

| Applicant Authority Type:: | Inventor |
|------------------------------------|----------------|
| Primary Citizenship Country:: | United Kingdom |
| Status:: | Full Capacity |
| Given Name:: | Daniel |
| Middle Name:: | Felix |
| Family Name:: | SMITH |
| Name Suffix:: | |
| City of Residence:: | San Jose |
| State or Providence of Residence:: | California |

| Country of Residence:: | USA |
|--|-----------------|
| Street of mailing address:: | 7048 Via Blanca |
| City of mailing address:: | San Jose |
| State or Province of mailing address:: | California |
| Country of mailing address:: | USA |
| Postal or Zip Code of mailing | 95139 |
| address:: | |

| Applicant Authority Type:: | Inventor |
|--|-------------------|
| Primary Citizenship Country:: | |
| Status:: | Full Capacity |
| Given Name:: | Shmuel |
| Middle Name:: | |
| Family Name:: | WINOGRAD |
| Name Suffix:: | |
| City of Residence:: | Scarsdale |
| State or Providence of Residence:: | New York |
| Country of Residence:: | USA |
| Street of mailing address:: | 235 Glendale Road |
| City of mailing address:: | Scarsdale |
| State or Province of mailing address:: | New York |
| Country of mailing address:: | USA |
| Postal or Zip Code of mailing | 10583 |
| address:: | |

Correspondence Information

| Correspondence Customer Number:: | 35987 |
|----------------------------------|-------|
|----------------------------------|-------|

| Name:: | Joseph P. Curtin, L.L.C. |
|---|--------------------------|
| Street of mailing address:: | 1469 N.W. Morgan Lane |
| City of mailing address:: | Portland |
| State or Province of mailing address:: | Oregon |
| Country of mailing address:: | USA |
| Postal or Zip Code of mailing address:: | 97229-5291 |
| Phone number:: | 503-296-8373 |
| Fax number:: | 503-297-0452 |
| E-mail address:: | josephpcurtin@aol.com |

Representative Information

| Representative | | |
|-------------------|-------|--|
| Customer Number:: | 35987 | |

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|---------------|-------------------|----------------------|----------------------|
| | Continuation of | | |
| | Continuation of | | |
| | Continuation of | | |

Foreign Priority Information

| Country:: | Application number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|---------------|--------------------|
| | | | |
| * | | | |
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Assignee Information

| Assignee name:: | International Business Machines Corporation |
|---|---|
| Street of mailing address:: | |
| City of mailing address:: | Armonk |
| State or Province of mailing address:: | New York |
| Country of mailing address:: | USA |
| Postal or Zip Code of mailing address:: | 10504 |